Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

09863395

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |               |                               |                     |                  |        | SMALL ENTITY TYPE O |                        |         | OTHER THAN     |                        |
|--|--|---|---------------|-------------------------------|---------------------|------------------|--------|---------------------|------------------------|---------|----------------|------------------------|
| TOTAL CLAIMS   |  |   | 49            |                               |                     |                  | Г      | RATE                | FEE                    |         | RATE           | FEE                    |
| FOR  |  |   | NUMBER FILED  |                               | NUMBER EXTRA        |                  |        | BASIC FEE           | 355.00                 | OR      | BASIC FEE      | · 710.00               |
| TOTAL CHARGEABLE CLAIMS  |  |   | 4 _ minus 20= |                               | ·d                  |                  |        | X\$ 9=              |                        | OR      | X\$18=         |                        |
| INDEPENDENT CLAIMS   |  |   | 2 _ minus 3 = |                               | 70                  |                  |        | X40=                |                        | OR      | X80=           |                        |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM P                              | RESENT        |                               |                     |                  | l      | +135=               |                        | OR      | +270=          |                        |
| * If   | the difference                                 | in column 1 is                            | less than ze  | ro, enter                     | "0" in c            | olumn 2          |        |                     | 355 m                  |         | TOTAL          |                        |
|  | C  | LAIMS AS A                                | - PAR         | TII                           |                     |                  | 4      | ヘコンツ                | yo                     | OTHER   | THAN           |                        |
|  |  | (Column 1)                                |               | (Colur                        | mn 2)               | (Column 3)       |        | SMALL E             | NTITY                  | OR      | SMALL          |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE           | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus         | **                            |                     | =                |        | X\$ 9=              |                        | OR      | X\$18=         |                        |
|  | Independent                                    | *   | Minus         | ***                           | F (C)   A (A 4      | =                |        | X40=                |                        | OR      | X80=           |                        |
|  | FIRST PRESE                                    | NTATION OF M                              | JLTIPLE DEF   | PENDEN                        | CLAIM               |                  | ı [    | +135=               |                        | OR      | +270=          |                        |
|  |  |   |               | `-                            |                     |                  | L      | TOTAL               |                        | OR      | TOTAL          |                        |
|  |  | (Column 1)                                |               | (Colu                         | mn 2)               | (Column 3)       |        | ADDIT. FEE          |                        |         | ADDIT. FEE     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUM<br>PREVI          | IEST<br>IBER        | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE           | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus         | **                            |                     | =                | ] [    | X\$ 9=              |                        | OR      | X\$18=         |                        |
|  | Independent                                    | *   | Minus         | ***                           |                     | =                | ]      | X40=                |                        | OR      | X80=           |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                               |                     |                  | J      | +135=               |                        | OR      | +270=          |                        |
|  |  |   |               |                               |                     |                  | L      | TOTAL               |                        | OR      | TOTAL          |                        |
|  |  | (Oak                                      |               | (O-l                          | 0)                  | (Caluma 0)       |        | ADDIT. FEE          |                        | JO: 1   | ADDIT. FEE     |                        |
|  |  | (Column 1)<br>CLAIMS                      |               | (Colui                        |                     | (Column 3)       | 1 г    |                     | ADDI                   |         |                | 4001                   |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |               | PREVI                         | BER<br>OUSLY<br>FOR | PRESENT          |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE           | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus         | **                            |                     | =                |        | X\$ 9=              |                        | OR      | X\$18=         |                        |
|  | Independent                                    | •   | Minus         | ***                           |                     | =                | 11     | X40=                |                        | OR      | X80=           |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                               |                     |                  |        | 405                 |                        |         | .070           |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |               |                               |                     |                  |        |                     |                        | OR      | +270=<br>TOTAL |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEEOR |  |   |               |                               |                     |                  |        |                     |                        | OR      | ADDIT. FEE     |                        |
|  |  | nber Previously Pa                        |               |                               |                     |                  | er fou | nd in the app       | ropriate box           | c in co | olumn 1.       |                        |